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DEMARATION PADE	WOR Reduction Act of 1995.	no cersons	Application Number	10/61		nation unless i	displays a valid OMB control number.
TRANSMITTAL			Filing Date	July 3	July 3, 2003		
	FORM		First Named Inventor	MCDC	MCDONALD et al.		
			Art Unit	1623			
(to be used for all	correspondence after initial	filing)	Examiner Name	OLSO	OLSON, Eric		
		;	Attorney Docket Number	8105-	8105-009-US-CON		
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Fee Transm	nittal Form		Drawing(s)]	After	Allowance Communication to TC
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Amendment	t/Reply		Petition Petition to Convert to a		[al Communication to TC al Notice, Brief, Reply Brief)
Afte	r Final	│ <mark>└</mark> ─┘ ╒	Provisional Application		[Propr	etary Information
Affid	lavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address				Letter
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	ly to Missing Parts er 37 CFR 1.52 or 1.53						
	SIGNA	TURE O	F APPLICANT, ATT	ORNEY	, OR	AGENT	
Firm Name	CATALYST LAW GROUP	, APC					
Signature	DM						
Printed name	Printed name David M. Kohn, J.D.						
Date A	august 25, 2006			Reg. No	o. 5	53,150	
CERTIFICATE OF TRANSMISSION/MAILING							
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:							
Signature	8.4	40					
Typed or printed na	me Sara Hare					Date	August 25, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If there are any additional charges, please charge Deposit Account No. 502-235.

Sincerely yours,

Date: August 25, 2006

David M. Kohn, J.D. CATALYST LAW GROUP, APC Registration No: 53,150

Enclosure(s)



<u>IN THE UNITED STATES PATENT AND TRADEMARK OFFICE</u>

Applicant: McDonald et al. | Examiner: OLSON, Eric

Serial No: 10/613,788 Art Unit: 1623

Filed: July 3, 2003 Attorney

Ref. No: 8105-009-US-CON

Title: METHOD OF LONG TERM
TREATMENT OF GRAFT-VERSUS-HOST
DISEASE USING TOPICAL ACTIVE

CORTICOSTEROIDS

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop: Amendment

Honorable Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

This document is a Supplemental Information Disclosure Statement to the above-cited patent application.

Attached is at least one form PTO/SB/08A/B listing documents believed relevant to the subject application. The submission of the following information is not intended, nor should it be construed, to constitute an admission that any patent, article, or other information referred to herein is "prior art" unless specifically designated as such. In accordance with 37 C.F.R. § 1.97(b), the filling of this information shall not be construed to mean that a search has been made or that no other material information may exist.

Neither should its submission be construed to indicate that a thorough search should not be conducted by the Examiner.

It is believed that this disclosure complies with the requirements of 37 C.F.R. § 1.96, § 1.97, and § 1.98 and the Manual of Patent Examining Procedures § 707.05(b). If for some reason the Examiner considers otherwise, it is respectfully requested that the undersigned be telephoned at (858) 450-0099 x308 so that any deficiencies can be remedied.

This Supplemental Information Disclosure Statement is being submitted before the mailing date of a Final Office Action under §1.113 for the above-identified patent application.

Accordingly, no fee is due for the filing of this Information Disclosure Statement under 37 C.F.R. § 1.97(c).

A copy of each document is enclosed. Some of the documents may have markings thereon. No significance is to be attached to the markings. These documents are not necessarily analogous art. Additionally, the order of the following documents is to be accorded no particular import, as the order thereof is completely fortuitous.

It is respectfully requested that these documents be: (1) fully considered by the Patent and Trademark Office during the prosecution of this application; and (2) represented on any patent which may issue on the application. Applicant respectfully requests that copies of the forms PTO/SB/08A/B, as considered and initialed by the Examiner, be returned with the next communication.

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PTO/SB/08B (07-06)
Approved for use through 09/30/2006. OMB 0651-0031
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00.00				Application Number	10/613,788		
INFORMATION DISCLOSURE				Filing Date	July 3, 2003		
STA	STATEMENT BY APPLICANT			First Named Inventor	MCDONALD et al.		
	// los se manus she	4		Art Unit	1623		
(Use as many sheets as necessary)			ecessary)	Examiner Name	OLSON, Eric		
Sheet	1	of	1	Attorney Docket Number	8105-009-US-CON		

Examiner	Cite	NON PATENT LITERATURE DOCUMENTS Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of	<u> </u>
Initials*	No.1	the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		CHRISTY, NP et al. "Comparative Effects of Prednisone and of Cortisone in Suppressing" J Clin Endocrinol Metab, 1956; 16: 1059-1074.	
		PRAHL, P et al. "Adrenocortical Suppression Following Treatment with Beclomethasone" Clin Exp Allergy, 1999; 21: 145-146.	
		UTIGER, RD et al. "Differences Between Inhaled and Oral Glucocorticoid Therapy" N Engl J Med, 1993; 329: 1731.	
		·	

Examiner	Date	
Signature	Considered	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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